



National Outcome Measures (NOMs)

Technical Assistance Session
September 12, 2006
3:00 – 5:00 PM



PURPOSE

- To provide an introduction and overview of the recovery outcome measures, including National Outcome Measures (NOMs)
- To train T/RBHA and provider clinical staff on the specific recovery measures and new measures to be added
- To discuss implications and technical assistance needs

What are the DBHS recovery measures?

History and Purpose

- Children's Health Act of 2000 established federal requirements for outcome measurement for the Block Grants; real-life measures of individual progress in treatment
- Connections to SAPT, CMHS Block Grants and ADHS QM Plan
 - movement to recovery-oriented system of care and measurement of outcomes vs. process



Data Validation

- SOMMS Award – Arizona established 2 FTE to conduct demographic validation
 - Compare assessment/NOMs submittals against medical records



Clinical

■ Core Behavioral Health Assessment (2002-2004)

- Single required assessment for all populations
- NOMs elements embedded in tool
- Clinicians submit intake NOMs during the first patient assessment
- Discharge NOMs embedded in discharge tool
- Problem: Many clinicians do not know they are submitting NOMs



Infrastructure Needs for NOMs Reporting

- Clinicians/providers must submit data
- Method for ensuring integrity of the data:
 - ✓ Accuracy
 - ✓ Completeness
 - ✓ Timeliness
- Methods for overseeing extraction of measures, standardized and consistent reports
- Method for making data clinically meaningful



Data Oversight

■ Internal Data Committee

- Multi-disciplinary
- Manage requests for changes to data system
- Standardize all reports
- Develop & finalize NOMs data extraction protocols to ensure consistent reporting
- Implement SOMMs changes



Overall Goals

- Outcome oriented system
- Use process driven pieces
 - Strategies
 - Goals
 - Implications



What are the National Outcome Measures?

*See handouts

- Domains
- Outcomes
- Measures
 - Mental Health
 - Substance Abuse
 - ❖ Treatment
 - ❖ Prevention

**Substance Abuse and Mental Health Services Administration
National Outcome Measures (NOMs)**

DOMAIN	OUTCOME	MEASURES		
		Mental Health	Substance Abuse	
			Treatment	Prevention
Reduced Morbidity	Abstinence from Drug/Alcohol Use	NOT APPLICABLE	Reduction in/no change in frequency of use at date of last service compared to date of first service ►	30-day substance use (non-use/reduction in use) ► Perceived risk/harm of use ► Age of first use ► Perception of disapproval/attitude
	Decreased Mental Illness Symptomatology	Under Development	NOT APPLICABLE	NOT APPLICABLE
Employment/Education	Increased/Retained Employment or Return to/Stay in School	Profile of adult clients by employment status and of children by increased school attendance ►	Increase in/no change in number of employed or in school at date of last service compared to first service ►	Perception of workplace policy; ATOD-related suspensions and expulsions; attendance and enrollment
Crime and Criminal Justice	Decreased Criminal Justice Involvement	Profile of client involvement in criminal and juvenile justice systems	Reduction in/no change in number of arrests in past 30 days from date of first service to date of last service ►	Alcohol-related car crashes and injuries; alcohol and drug-related crime
Stability in Housing	Increased Stability in Housing	Profile of client's change in living situation (including homeless status) ►	Increase in/no change in number of clients in stable housing situation from date of first service to date of last service ►	NOT APPLICABLE
Social Connectedness	Increased Social Supports/Social Connectedness ¹	Under Development	Under Development	Family communication around drug use
Access/Capacity	Increased Access to Services (Service Capacity)	Number of persons served by age, gender, race and ethnicity ►	Unduplicated count of persons served; penetration rate—numbers served compared to those in need ►	Number of persons served by age, gender, race and ethnicity
Retention	Increased Retention in Treatment - Substance Abuse	NOT APPLICABLE	Length of stay from date of first service to date of last service ► Unduplicated count of persons served ►	Total number of evidence-based programs and strategies; percentage youth seeing, reading, watching, or listening to a prevention message
	Reduced Utilization of Psychiatric Inpatient Beds - Mental Health	Decreased rate of readmission to State psychiatric hospitals within 30 days and 180 days ►	NOT APPLICABLE	NOT APPLICABLE
Perception of Care	Client Perception of Care ²	Clients reporting positively about outcomes ►	Under Development	NOT APPLICABLE
Cost Effectiveness	Cost Effectiveness (Average Cost) ²	Number of persons receiving evidence-based services/number of evidence-based practices provided by the State	Number of States providing substance abuse treatment services within approved cost per person bands by the type of treatment	Services provided within cost bands
Use of Evidence-Based Practices	Use of Evidence-Based Practices ²		Under Development	Total number of evidence-based programs and strategies

Overview of the Current NOMs - Requirements

1. Core Assessment (where the data comes from)
2. CIS fields
 - ❑ How are they defined and what is populated
3. Frequency of Reporting
4. Cost Effectiveness & Evidence Based Practices
5. Consumer Satisfaction



NOMs Fields Collected From Assessment/CIS

- Drug/Alcohol Use
- Employment
- Number of Arrests
- Primary Residence





Overview of the Current NOMs - Requirements

- Core Assessment (where the data comes from)

Drug/Alcohol Use

Substance Related Disorder section of Core Assessment

(See table)

Example of Completed Table for Question B.3

Substance Use in Past 12 Months (please circle)	Freq. (use code below)	Route (use code below)	Age First Used	When Last Used	Current Use (past 30 days) Primary (P) or Secondary (S)
Alcohol	4	1	10	Yesterday	S
Marijuana	5	2	11	Today	P
Stimulants <ul style="list-style-type: none"> Methamphetamine Cocaine/crack Other (e.g., Ritalin, amphetamine) 	2	2	11	Two weeks ago	
Opiates/Narcotics <ul style="list-style-type: none"> Heroin Other (e.g., codeine, hydrocodone, oxycodone, oxycotin, propoxyphene, non-prescription methadone) 					
Depressants <ul style="list-style-type: none"> Benzodiazepines (e.g., Valium, Klonopin, Ativan, Xanax, Halcion) Other sedatives, tranquilizers hypnotics (e.g., Soma, Benadryl, barbiturates) 	3	1	25	Last Week	
Hallucinogens: LSD, PCP, MDMA, sherns, ecstasy, ketamine, psilocybin, etc.					
Inhalants: glue, paint, gasoline, other solvents/aerosols, etc.					
Other Drugs: non-narcotic analgesics, GHB, other/unclassified and other medications used in excess of prescription [e.g., Prozac, Haldol, Robitussin]. Specify type: _____					

Codes for Table

Frequency of Use/Abuse: 1 No use in past 30 days
2 1-3 times in past 30 days
3 1-2 times per week
4 3-6 times per week
5 Daily/multiple times per day

Route of Administration: 1 Oral
2 Smoked
3 Inhaled
4 Injected
5 Other (specify in table)

Overview of the Current NOMs - Requirements

Core Assessment (where the data comes from) *cont'd*

- Employment
 - ✓ Employment Addendum



Employment Addendum

Specific Questions

1. Are you currently working (full, part-time or volunteer)? Yes No

1(a) If yes, describe your current job, (e.g., type of work, work environment, length of employment, attitude toward work) and how the work affects your life (e.g., family, leisure time, health, relationships)?

1(b) If no, when was the last time you worked (i.e., date) and what prompted the change (e.g.,

reasons you left that job)? Are you interested in finding employment (describe interests)?

2. Describe your work and/or military history. How do you feel about it? How has it impacted your life?

3. Describe strengths or barriers that have influenced your ability to work.

4. Are there any supports or resources you need in order to get a job and/or keep your current job?



Overview of the Current NOMs - Requirements (cont'd)

Core Assessment (where the data comes from) *cont'd*

- Number of Arrests
 - ✓ Criminal Justice Addendum

Criminal Justice Addendum

Specific Questions

1. Recent Criminal Justice History

1(a) Criminal Justice Involvement

<u>1(a) Criminal Justice Involvement</u>	<u>Current (last 30 days)</u>	<u>Past Six Months</u>
Legal Issues (e.g., pending charges, court dates)	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Probation	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Parole	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Court-Ordered Treatment	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Arrests		<input type="checkbox"/> No <input type="checkbox"/> Yes, if yes how many?

1(b) Provide additional information about any of the items marked “yes” above.

2. Does this person have a Probation/Parole Officer? No Yes, indicate type and conditions of parole/probation.

3. Describe any other significant offenses** for which you have been arrested/charged and/or adjudicated (including type of offense, date of offense, legal action taken, resolution, current status) and what impact these events have had on your life.

4. As a result of involvement with the legal system, have there been any positive aspects/benefits that have resulted for you and/or your family? If so, please describe.

Overview of the Current NOMs – Requirements (cont'd)

Core Assessment (where the data comes from) *cont'd*

- Primary Residence

- ✓ Living Environment Addendum



Living Environment Addendum

Specific Questions

1. Briefly describe your living environment. Where do you live? Do you like it? Who do you live with? How do you spend a typical day? (e.g., What is the flow of your day like? Do you have specific daily activities - what are they, which ones do you enjoy? Do you know each day what you will be doing that day? Do you do things at the same time each day? Are you with others during the day? What makes for a good day?)
2. Have you recently experienced any significant change in your living environment/situation (e.g., removal from family, divorce, adoption, school suspension, family death, auto accident, loss of job/income)? No Yes If yes, how have you dealt with this issue?
3. If appropriate ask: How long have you been in this country? How is life different here?
4. How well are you able to complete activities of daily living (e.g., bathing, eating, dressing, household management, homework, chores)? Explain any difficulties, including the type of assistance required.

Overview of the Current NOMs - Requirements

CIS fields:

- ❑ How are the NOMs defined and what is populated
- ❑ Currently in process of updating Data User Guide (DUG), which will provide in-depth detail regarding all changes.



Overview of the Current NOMs - Requirements

CIS fields

Drug/Alcohol Use

- Currently captured in fields 72-79 in CIS
- Specifically used for NOMs reporting:
 - ▣ Substance Abuse Type I (72) and Type II (76)

Overview of the Current NOMs - Requirements

CIS fields

- Drug/Alcohol Use *(cont'd)*

Change Needed to be Compliant with NOMs:

✓ TO BE ADDED: 97-100

Substance Abuse Type 3, Frequency 3, Route 3, Age at First Use 3





Overview of the Current NOMs - Requirements

CIS fields: (How are the NOMs defined and what is populated)

Employment Status

Currently field 66 in CIS

- 01 Employed full time without support
- 02 Employed part time without support
- 03 Employed full time with support
- 04 Employed part time with support
- 08 Unemployed
- 14 Volunteer
- 17 Unpaid rehabilitation activities
- 18 Retired, homemaker or student
- 99 Unknown



Overview of the Current NOMs - Requirements

CIS fields

Employment Status

- Change Needed to Be Compliant with NOMs:

18 Retired, homemaker or student will be INVALID and the following will be ADDED:

- 19 Homemaker
- 20 Student
- 21 Retired
- 22 Disabled
- 23 Inmate of institution



Overview of the Current NOMs - Requirements

CIS fields

- How are the NOMs defined and what is populated in the following fields:
 - ❑ Number of Arrests
 - ❑ Currently CIS field 71
 - ❑ For initial intake, number of arrests in past 6 months prior to intake.
 - ❑ For updates or disenrollment, the number since last data update. Valid Values 00-99

Overview of the Current NOMs - Requirements

CIS fields

Number of Arrests

Definitional Change Needed to be Compliant with NOMs:

Number of arrests in PAST 30 DAYS



Overview of the Current NOMs - Requirements

CIS fields:
Primary Residence

Field 69- NO CHANGE FOR NOMs

- 01 Independent
- 02 Hotel
- 03 Boarding home
- 04 Supervisory care, assisted living
- 05 Arizona State Hospital
- 06 Jail, Prison, detention
- 07 Homeless, homeless shelter
- 08 Other
- 09 Foster home
- 12 Nursing home
- 16 Home with family
- 18 Crisis shelter
- 22 OBHL Level 1, 2 or 3
- 23 Transitional housing (level 4)

Overview of the Current NOMs - Requirements

Frequency of Reporting

□ Adult:

- intake, discharge, annual update

□ Child:

- intake, discharge, every 6 months, annual update





Overview of the Current NOMs - Requirements

- Cost Effectiveness & Evidence Based Practices
 - Based on encounters

NOMs Sample Data Set

- SEE Handouts



DOMAIN	OUTCOME	MENTAL HEALTH MEASURES	MENTAL HEALTH OUTCOMES	SUBSTANCE ABUSE MEASURES	SUBSTANCE ABUSE OUTCOMES
Reduced Morbidity	Abstinence from Drug/Alcohol use	NOT APPLICABLE	NOT APPLICABLE	Reduction in/no change in frequency of use at date of last service compared to date of first service	Increase of 3.42% of consumers abstinent from alcohol use from admission (47.52%) to discharge (50.94%) ^[1] Increase of 1.47% of consumers abstinent from drugs from admission (41.67% to discharge 43.13%) ¹
	Decreased mental Illness Symptomatology	UNDER DEVELOPMENT	UNDER DEVELOPMENT	NOT APPLICABLE	NOT APPLICABLE
Employment /Education	Increased/Retained Employment or Return to/stay in School	Profile of adult clients by employment status and of children by increased school attendance	No change between FY 04 (15%) and 05 (15.4%) in the percentage of employed enrolled persons with SMI ²	Increase in/no change in number of employed or in school at date of last service compared to first service	NOT REPORTED IN FY 2006 SAPT BLOCK GRANT
Crime and Criminal Justice	Decreased Criminal Justice involved	Profile of client involvement in criminal and juvenile justice systems	NOT REPORTED IN FY 2006 CMHS BLOCK GRANT	Reduction in/no change in number of arrests in past 30 days from date of first service to date of last service	% of consumers arrested decreased 6.63% from FY 05 to FY 06 (from 31.34% to 24.71%) ¹
Stability in Housing	Increased Stability in Housing	Profile of client's change in living situation (including homelessness status)	Number of housing units increased by 82 units from FY 04 to 05 ²	Increase in/no change in number of clients in stable housing situation from date of first service to date of last service	% of homeless decreased by 1.08% from FY 04 (10.73%) to FY 05 (9.66%) ¹

[1] Source: SAPT Block Grant Application FY 06

Access/ Capacity	Increased access to services (service Capacity)	Number of persons served by age, gender, race and ethnicity.	No change in % of enrolled SMI consumers (out of estimated total SMI in state) from FY 04 (25%) to FY 05 (24.4%) ² Increase of 3,914 enrolled homeless SMI consumers from FY 04 (1,342) to FY 05 (5,256) ² .	Unduplicated count of persons served; penetration rate-numbers served compared to those in need	Total number of identified substance abuse consumers receiving treatment was reported to be 37,295 for CY 2004 (TEDS)
Retention	Increased Retention in Treatment-Substance Abuse	NOT APPLICABLE	NOT APPLICABLE	Length of stay from date of first service to date of last service	Average LOS varied by LOC from 0 days (Detox) to 88 days (Long-term rehabilitation/residential) ¹
				Unduplicated count of persons served	For SAPT Block grant services, including prevention, the total number of persons serve was reported as 215,004 ¹
	Reduced Utilization of Psychiatric Inpatient Beds-Mental Health	Decreased rate of readmission to State psychiatric hospitals within 30 days and 180 days	30 days: Maintenance of readmission from FY 04 to 05 (1%) ² 180 days: Reduced by 6% from FY 04 (9%) to FY 05(3%) ^[1]	NOT APPLICABLE	NOT APPLICABLE
Social Connectedness	Increased Social Supports/ Social Connectedness	UNDER DEVELOPMENT	UNDER DEVELOPMENT	UNDER DEVELOPMENT	UNDER DEVELOPMENT

[1] Source: CMHS Block Grant Application FY 06

Partial table – Continued next slide

Perception of Care	Client Perception of Care	Clients report positively about outcomes	The percentage of consumers reporting positively about outcomes increased 14% from 65% in FY 03 to 79% in FY 05 ²	UNDER DEVELOPMENT	UNDER DEVELOPMENT
Cost Effectiveness	Cost Effectiveness (Average Cost)	Number of persons receiving evidence-based services/number of evidence-based practices provided by the state	Number of EBP increased from 7 to 9 from FY 04 to 05 ²	Number of states providing substance abuse treatment services within approved cost per person bands by the type of treatment	NOT REPORTED IN FY 2006 SAPT BLOCK GRANT
Evidence-Based Practices	Use of Evidence-Based Practices			UNDER DEVELOPMENT	UNDER DEVELOPMENT

Partial table

Consumer Satisfaction Survey

- Extracting data from the MHSIP survey on Consumer Satisfaction



Implications, TA Needs and Strategies to Make it Meaningful

I. Discussion Questions

- Need for thoughtful strategy for what to do with performance measures
 - Outcomes just one part of a comprehensive CQI approach
- Understanding the results – what does it take to move a measure?
- Paying for performance





Implications, TA Needs and Strategies to Make it Meaningful

(cont'd)

II. Possible TA Strategies (discussion)

- Provider Data and Performance Workshops
- Regional Profiles
- Sharing extraction templates
- Contract standards, benchmarks and incentives



Did you know?

- The National Provider Identifier will be a requirement of all providers beginning in May, 2007
 - Go to <https://nppes.cms.hhs.gov> to register
 - E-mail a copy of your NPI to AHCCCS at nationalproviderID@azahcccs.gov



THANK YOU!

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